

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION			
O.I.P.E. CLASSIFIER	M.D.W	10	02-03-01
FORMALITY REVIEW	AK	931	02/26/01
RESPONSE FORMALITY REVIEW	AB	676	05/01/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted 0 Objected

Claim	Date
1	Final Original 3/15/01
2	2
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Claim	Date
51	Final Original 3/15/01
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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